

STATE OF HAWAII
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
Business Registration Division
1 01 0 Richards Street - P. O. Box 40
Honolulu, Hawaii 96810

APPLICATION FOR REGISTRATION AS INVESTMENT ADVISER REPRESENTATIVE

(This form is to be used for initial applications and for applicants who have been previously registered, but whose registrations have lapsed for more than two years. COMPLETE this form in BLACK INK including signatures.)

The undersigned, an applicant for registration as an investment adviser representative in securities, submits the following information to the Commissioner of Securities as required by Section 485-14(j), Hawaii Revised Statutes:

1. Name, residence address and social security number of applicant.

2. a) Place and date of birth.

b) State length of residence in the State of Hawaii.

3. List all business experience during the five years prior to this application, showing name and complete address of employers, positions held, nature of occupations, and dates. (Start with current employment-, please account for the full five years. Dates must include month, day & year.)

Name of Employer	Address	Position	Nature of Occupations	Time Employed

4. Name and complete residence address of three references as to the character and reputation of the applicant, excluding relatives.

Name	Residence Address

FOR DEPARTMENTAL USE ONLY	
	EXAMINATION RESULTS

5. Has applicant during the ten years prior to this application misappropriated or converted moneys of others for his/her own use, or been accused of so doing or has been the subject of a complaint or legal proceeding? ☐ Yes ☐ No. If yes, attach a complete statement of facts in respect thereto.
6. Has applicant been convicted of a violation of a criminal statute? ☐ Yes ☐ No. If yes, attach a complete statement of facts in respect thereto.
7. Has applicant been denied registration in any state as an investment adviser representative or investment adviser in securities, or had registration as such suspended or revoked prior to this application? ☐ Yes ☐ No. If yes, attach a complete statement of facts in respect thereto.
8. Has applicant ever been registered in any state as an investment adviser representative or investment adviser in securities prior to this application? [] Yes [] No. If yes, attach a complete statement of facts in respect thereto, listing names of employers, employers' addresses, dates of employment and states registered in.
9. State complete name and business address of investment adviser in securities appointing applicant.

10. Examination exemption:

A. Applicant claims exemption from taking the investment adviser examination for the reason indicated:

- (1) ☐ Has been continuously licensed by the SEC as an investment adviser as of January 1, 1983. (Attach copy of license.)
- (2) ☐ Has passed the SEC examination for investment advisers not more than two years immediately preceding the date of filing. (Attach proof of passing.)
- (3) ☐ Has passed a specific examination or examinations for investment advisers given by the NASD. (Attach proof of passing.)
- (4) ☐ Has passed a specific examination or examinations for investment advisers given by any national securities exchange. (Attach proof of passing.)
- (5) ☐ Has passed the series one securities examination given by the NASD and has been continuously licensed with a securities broker-dealer or investment adviser since passing the examination. (Attach proof of passing and continuous licensure.)
- (6) ☐ Has passed the series seven general securities examination given by the **NASD not more than** two years immediately preceding the date of filing. (Attach proof of passing.)
- (7) ☐ Has passed the series seven general securities examination given by the **NASD more than** two years immediately preceding the date of filing and has been continuousIV licensed with a securities broker-dealer or investment adviser since passing the examination. (Attach proof of passing and continuous licensure.)
- (8) ☐ Has passed a specific examination or examinations for a chartered investment consultant (CIC) and been **designated as a chartered investment consultant. (Attach proof of passing the CIC examination(s) and submit a confirmation letter from the CIC organization addressed to the Commissioner of Securities regarding applicant's chartered designation.)**
- (9) ☐ **Has passed a specific examination or examinations for a chartered financial analyst (CFA) and been designated as a chartered financial analyst. (Attach proof of passing the CFA examination(s) and submit a confirmation letter from the CFA organization addressed to the Commissioner of Securities regarding applicant's chartered designation.)**

11. Examination:

Applicant will take the examination indicated:

- ☐ Investment adviser examination at the Department of Commerce and Consumer Affairs, Honolulu, or

 (Island other than Oahu)

If applicant wishes to take the investment adviser examination, an application must be completed and an examination fee of \$50 must be paid before the closing date.

12. The applicant shall specify the number of times of failure to pass the exam requirement provided by section 16-38-51 or the SEC examination.

_____ No. of times of failure to pass the Hawaii examination

_____ No. of times of failure to pass the SEC examination

State of _____

} ss.

_____ being first duly sworn on oath deposes and says that he/she is the applicant named in the foregoing application, that he/she has read the application and all documents attached thereto-, that the information contained in the application and the documents is true to the best of his/her knowledge and belief.

(Signature of Applicant)

Subscribed and sworn to before me this _____ day of _____, 19____

Signature of Notary Public

My Commission Expires: _____

ORIGINAL
PHOTOGRAPH
REQUIRED
(Attach Here)

***** (Complete upper portion before lower portion) *****

(Officer of Firm shall complete this section.)

APPOINTMENT OF INVESTMENT ADVISER REPRESENTATIVE

(Date)

I have read the foregoing application and believe the information contained therein to be true and complete, and have no knowledge to the contrary. I hereby appoint _____ as an investment adviser

(Printed or Typed Name of Applicant)

representative, and agree to notify the Commissioner of Securities immediately upon the termination of his/her employment and will return his/her certificate of registration for cancellation.

Please check applicable block:

☐ Investment Adviser -
SEC Registered

☐ Investment Adviser -
Non-SEC Registered

(Investment Adviser Firm Name)

(Signature)

(Printed or Typed Name)

Title: _____

APPLICANT CERTIFICATION

I, _____, hereby certify to the Commissioner that I have carefully reviewed the
(Printed or Typed Name of Applicant)

Hawaii Uniform Securities Act (Modified), Chapter 485, Hawaii Revised Statutes, and Title 16, Chapter 38, relating to the rules under the Hawaii Uniform Securities Act (Modified). I further certify that I understand my duties and responsibilities as a licensed investment adviser representative.

In particular, I certify that I have not only studied the law generally but also the following provisions:

1. Section 485-4, HIRS, relating to exempt securities-,
2. Section 485-6, HIRS, relating to exempt transactions-,
3. Section 485-14, HIRS, and Subchapter 12, Chapter 38, relating to the registration and renewal requirements for *investment* adviser representatives-, and
4. Sections 485-15 and 25, HIRS, and Subchapter 4, Chapter 38, relating to fraudulent/prohibited practices and revocation or suspension of investment adviser representatives' registrations.

I so certify and make this filing with the Commissioner in connection with my application for a Hawaii investment adviser representative license as evidence of my qualifications for such license.

Dated this _____ day of _____, 19____

(Signature)

(Printed or Typed Name)

(Complete upper portion before lower portion)

(Officer of Firm shall complete this section.)

INVESTMENT ADVISER CERTIFICATION

I, _____, an officer, director, partner, or sole proprietor (**circle one**)
(Printed or Typed Name)
of _____, certify to the Commissioner that the above
(Investment Adviser Firm Name)
applicant for a Hawaii investment adviser *representative license* has been provided adequate instruction with respect to his/her duties and responsibilities under the Hawaii Uniform Securities Act (Modified) and the rules promulgated thereunder.

Dated this _____ day of _____, 19____

(Signature)

(Printed or Typed Name)

Title: _____